Please email, mail or drop off completed application and resume to townmanager@southbethany.org. (Subject line "Chief Search")

Mail to: Town of South Bethany, Chief Search, 402 Evergreen Road, South Bethany, DE 19930

TOWN OF SOUTH BETHANY, DELAWARE CHIEF OF POLICE

Application for Employment Closing Date: April 26, 2019

The Town of South Bethany is an equal opportunity employer to all regardless of race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status, or any other legally protected status.

How did you learn about the vacancy for Chief of Police?							
☐ Advertisement			Files				
The state of the s			Frien				
Employment Agency			10 10015-00 1 000				
Relative			Othe	r			
APPLICANT INFORMATION							
Last Name		First			Middle Name		
Street Address					Apartment/Unit #		
City	S	State			ZIP		
Phone	E	E-mail Address					
Social Security No.	P	Preferred Phone #					
Best time to contact you			a.	m.]		
Are you currently employed? YES □	NO						
Are you a Police Chief Police Officer C	Other [<u>'</u>					
Name of Employer:	outer [200				
The state of the s						,	
Address:							
What are your salary expectations?							
EDUCATION, TRAINING, AND EXPERIENCE							
Name & Address of Sch	nool		(Course of Study		ber of years ompleted	Diploma Degree
Elementary School					+		
High School							
College							
Police Administrative or Leadership Training							V.
Other (Specify)				7/			
Describe Administrative or Leadership Training	j inclu	uding duratio	on				
						R S	
							4-2
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August 1970 PR Suprementation					
Describe a	ny job-related training received in	the United St	tates Military		
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					V
	1				
EMPLOYME	ENT EXPERIENCE				
Start with you	ar present or last job. Include any job-relat e race, color, religion, gender, national ori	ed military servic gin, disabilities or	e assignments and v	rolunteer activities tus.	s. You may exclude organizations
Employer			Dates Employed From To		Work Performed
Address					
Telephone Number (s)	,	Starting Salary	\$	Ending Salary	\$
Supervisor			Job Title		
Reason for Le	aving				
Employer		set .	Dates Employed From To		Work Performed
Address					
Telephone Number (s)		Starting Salary	\$	Ending Salary	\$
Supervisor			Job Title	9	
Reason for Lea	aving				
Employer			Dates Employed From To		Work Performed
Address					
Telephone Number (s)		Starting Salary	\$	Ending Salary	\$
Supervisor			Job Title		
Reason for Lea	aving				
Employer			Dates Employed From To		Work Performed
Address					
Telephone Number (s)		Starting Salary	\$	Ending Salary	\$
Supervisor			Job Title		
Reason for Lea	aving				
	AT	TACH ADDITIONA	L PAGES IF NECESS	ARY	

List Professi national orig	onal, Trade, Business, or civic activities and offices held. You may exclude organ in, disabilities or other protected status.	izations v	which indicate race, color, religion, gender,
	and the second control of the second control		
	*		
State any add	itional information you feel may be helpful to us in considering your application.		
REFERENC	ES (At least five of which three must be professional)		
Full Name	Telephone #	T	
Address	releptione #		
Address			
Full Name	Telephone #		
Address	• *		
Full Name	Telephone #		
Address			
Full Name	Telephone #		
Address	Telephone #		
Address			
		T	
Full Name	Telephone #		
Address	×	-	
	'S STATEMENT		
	my answers are true and complete to the best of my knowledge.		
employment	evestigation of all statements contained in this application for employment decision.	it as may	be necessary in arriving at an
This applica	ion for employment shall be considered active for a period of time not to or employment beyond this time period should inquire as to whether or no		
	of employment, I understand that false or misleading information given in		
Signature		Date	